P.O. BOX 19276

SPRINGFIELD, ILLINOIS 62794-9276 (217) 782-6761

State Form LPC 62 8/81 IL532-0610 100135 FOR SHIPMENT OF HAZARDOUS AND SPECIAL WASTE

EASE TYPE	(Form designed for use on elite (1)		EPA Form 8700-2	2 (Rev. 6-89)	Form Appr	oved. OMB No. 2	2050-0039, Expires 9-30-94			
WAST	M HAZARDOUS E MANIFEST	1. Generator's US EP/	790	Manifest Document No.	2. Page 1 of	required by Fed Illinois law.	the shaded areas is not eral law, but is required by			
27 W J.	me and Mailing Address	Location If	Different Sayer Lad St Slate Co. Sough IL	fill site of		56673	Number FEE PAID IF APPLICABLE			
4. *24 HOUR EME	IL (OGOH ERGENCY AND SPILL ASSIS	TANCE NUMBERS 2	12-253-2318		Generator'	s 				
5. Transporter 1 Co		6.	US EPA ID Nun		C. Illinois Trai		1431			
7. Transporter 2 Co	1 11/11/11	1C   DIN	US EPA ID Nun		E. Illinois Trai		Transporter's Phone			
		L_			F. ( )	<u> </u>	Transporter's Phone			
9. Designated Faci Environde 10X Nikr	ility Name and Site Address  Table  NW Hy78	10.	US EPA ID Nun	nber	G. Illinois Facility's ID H. Facility's P	<u> </u>				
Mirch Base Rd. Grand View D 1_IDD073/14654						H. Facility's Phone (809, 274-1516				
	ription (Including Proper Shipp		<u> </u>	12. Conta No.	,   Te	3. 14 otal Un antity Wt/\	Waste No.			
a. R.Q. Poly	chlorinated Biphiny	6,9,UN 2315	P.G. III			(ex)	X X			
E	ERF#31			001	CMQQ		Authorization Number			
b.							EPA HW Number			
							Authorization Number			
c.				<u> </u>	·   _ 1 1		EPA HW Number			
							Authorization Number			
d.						1 1	EPA HW Number			
u.							$XX_{1}$			
						1 1 1	Authorization Number			
	F SCYNCE スコーク いース ng Instructions and Additional				G = Gallo	ons Y	= Cubic Yards			
proper shipping according to app If I am a large q be economically and future threa select the best v	CERTIFICATION: I hereby dec name and are classified, packe plicable international and nation quantity generator, I certify that practicable and that I have sele it to human health and the envir waste management method that	d, marked, and labeled, a al government regulation: I have a program in place cted the practicable meth onment; OR, if I am a sma	and are in all respects s. e to reduce the volume nod of treatment, stora all quantity generator,	in proper condit e and toxicity of ge, or disposal c	tion for transport waste generated urrently available	t by highway d to the degree e to me which	I have determined to minimizes the present waste generation and Date			
Printed/Typed	· / /)	LSEPA OSC	Signature	(1B.			Month Day Year			
17. Transporter 1	Acknowledgement of Receipt			7.			Date			
Printed/Typed	,, <del>, , ,</del> ,		Signature	2/	1		Month Day Year			
Charle	s H. Foster	-£ 14-4	Mule	17.	daste	1	<u>_033395</u>			
Printed/Typed	Acknowledgement of Receipt Name	or Materials	Signature				Date  Month Day Year			
Janes		,	Some :	3 Venza	_		032395			
19. Discrepancy In	dication Space 9- Envel - UNION PACIF 17271001 >5	SSOLE SINGE IC RAILEDAD	IN DO JOB	10 Inc. 3-11,0	, ynisc 04 14 1	vili, 8.	3624 gm			
112M 8-	- MED 0017	92910 #	Palos ?	auc	nanges	Diay	24. Marks			
Printed/Typed	or Operator: Certification of r	eceipt of nazardous ma	Signature	s manifest exc	ept as noted in	item 19.	Month Day Year			
Amber	Sloan fo	or ESI	Um	ber.	Slog	an	041795			
this information may resu	d to require pursuant to Illinois Re- ult in a civil penalty against the oversonment up to 5 years. This form has be	iner or operator not to exci	eed \$25,000 per day of	ind 1021, that this violation Falsificati	information be sion of this inform.	ubmitted to the ation may result	Agency. Failure to provide in a fine up to \$50,000			

The Illinois Uniform Manifest must be used for all shipments of special waste (hazardous and nonhazardous) stored, disposed of, treated or reclaimed in Illinois; and for all shipments originating in Illinois and destined for states that do not print and supply the form. PIMW (Potentially Infectious Medical Waste) requires a different manifest. For shipments not originating in Illinois, if the generator's state requires copies of the manifest, a photocopy of part 1 should be used.

## **INSTRUCTIONS TO GENERATORS** (Please type)

- 1. Enter generator's USEPA twelve digit identification number and the unique five digit document number assigned to this Manifest (eg. 00001) by the generator.
- 2. Enter total number of pages comprising this Manifest.
- 3. Enter generator's name and mailing address. If location of waste generation is different from mailing address, enter location to the right of mailing address.
- Enter telephone number where an authorized agent of the generator, who has knowledge of the waste, may be reached in the event of an emergency.
- B. Enter the generator's Illinois EPA ten digit identification number.
- 5,6,C,D. For the first transporter who will transport the waste, enter the company name, US EPA ID number, Illinois EPA four digit Special Waste Hauling (SWH) permit number, and telephone number where an authorized agent of the transporter may be reached in the event of an emergency.
- 7,8,E,F. If applicable, enter the information requested for the second transporter who will transport the waste.
- 9,10,G,H. For the facility designated to receive the waste, enter company name, address, US EPA ID number, Illinois EPA ten digit facility code number, and telephone number where an authorized agent of the receiving facility may be reached.
- 11. Enter the US DOT Proper Shipping Name, Hazard Class, and ID number (NA/UN number) for each waste as identified in 49 CFR 171 through 177. For wastes not regulated as Hazardous Materials by DOT, enter a description of the waste and the generic name of the waste, plus the phrase "not hazardous by DOT."
- 12. Enter the number of containers for each waste and the appropriate abbreviations for the type of container:

DM =CM =Metal boxes or roll-offs Metal drums CW = DW = Wooden drums Wooden boxes DF =CF =Fiberboard or plastic bags Fiberboard or plastic drums CY =BA =Burlap, cloth, paper or plastic bags Cylinders TT Tank trucks DT =Dump trucks TP TC = Tank cars Tanks portable

- 13. Enter the total quantity (gallons or cubic yards) of each waste.
- 14. Enter G if quantity is in gallons or Y if quantity is in cubic yards. No other unit is to be used. To track weight if desired, enter pounds, tons or kilograms in Section J.
- I. Enter the EPA 4 digit Hazardous Waste Number: if waste is a mixture of listed and characteristic wastes, the listed waste must be entered other numbers should be listed in Section J. For nonhazardous special wastes, enter Class A. Enter the Illinois EPA six digit waste stream permit (authorization) number for the waste stream (these numbers are specific for each waste stream and companies, and are obtained from the receiving facility) (leave blank for waste going out of Illinois).
- J,K. If needed, enter additional description or information/instructions for the material listed in item 11.
- 15. If needed, indicate special transportation, treatment, storage, or disposal information, or Bill of Lading information. For international shipments, generators must enter the point of departure (City and State) for shipments destined for treatment storage, or disposal outside the jurisdiction of the United States in this space.
- 16. The generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to highway is used, enter the appropriate additional mode.

GENERATOR: RETAIN COPY 6 AND MAIL COPY 5 TO IEPA WITHIN 2 DAYS OF THE SHIPMENT

INSTRUCTIONS TO TRANSPORTER: 17,18. The person accepting the waste on behalf of the transporter must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt. UPON DELIVERY OF WASTE TO FACILITY, retain copy 4 and leave remaining copies with the facility owner/operator.

## INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES:

- 19. The authorized representative of the designated (or alternate) facility's owner or operator must note in Item 19 any significant discrepancy (as defined in 35 Ill. Adm. Code 725.172) between the waste described on the Manifest and the waste actually received at the facility. Reference the discrepancy by line A, B, C, or D.
- 20. Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste by signing and entering the date of receipt.

Retain copy 3, send copy 1 to the generator, and send copy 2 to Illinois EPA (within 30 days of the delivery).

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U. S. Environmental Protection Agency, 401 M Street SW., Washington, DC 20480; and the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

Z0. U3	DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	No.	Туре	Quantity	Wt/Vol	Wasie NO.
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b.						
c.		<u> </u>	+		┿┽	
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g.						
h.						
i.						
	j					
S. Add	tional Descriptions for Materials Listed Above	T. Handling Codes for Wastes Listed Above				
32. Sp	ecial Handling Instructions and Additional Information					
}						
-					<del></del>	
	ansporter Acknowledgement of Receipt of Materials	<i>A A</i>			<del></del>	Date Vac
6	nted/Typed Name Signature Signature	<i>i 00.</i> .	MAR	Brow	م ا ا	Month Day Year

Signature

Date

Year

Month Day

34. Transporter

Printed/Typed Name

35. Discrepancy Indication Space

Acknowledgement of Receipt of Materials

ENVIROSAFE SERVICES OF IDAHO, INC. P.O. BOX 16217
BOISE, IDAHO 83715-6217
EPA ID: IDD073114654

04/17/95

USEPA/SAUGET LANDFILL ST. CLAIR COUNTY

SAUGET IL

## CERTIFICATE OF DISPOSAL

THE FOLLOWING WASTE RECEIVED ON UNIFORM HAZARDOUS WASTE MANIFEST NO. 006 / IL6566733 WAS DISPOSED BY LANDFILLING IN AN APPROVED TSCA LANDFILL BY ENVIROSAFE SERVICES OF IDAHO, INC., EPA ID# IDD073114654, ON THE FOLLOWING DATES:

MATERIAL

DATE DISPOSED

MANIFEST ITEM

1 PCB BULK SOLID-REGULAR

04/14/95

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UNDER CIVIL AND CRIMINAL PENALITIES OF LAW FOR MAKING OR SUBMISSION OF FALSE OR FRAUDULENT STATEMENTS OR REPRESENTATIONS [18 U.S.C. 1001 AND 15 U.S.C 2615], I CERTIFY THAT THE INFORMATION CONTAINED IN OR ACCOMPANYING THIS DOCUMENT IS TRUE, ACCURATE AND COMPLETE. AS TO THE IDENTIFIED SECTION(S) OF THIS DOCUMENT FOR WHICH I CANNOT PERSONALLY VERIFY TRUTH AND ACCURACY, I CERTIFY AS THE COMPANY OFFICIAL HAVING SUPERVISORY RESPONSIBILTY FOR THE PERSONS WHO, ACTING UNDER MY DIRECT INSTRUCTIONS, MADE THE VERIFICATION THAT THIS INFORMATION IS TRUE, ACCURATE AND COMPLETE.

PRINTED NAME: LYNN LAWSON

SIGNATURE (MULLEUX

TITLE: RECEIVING SUPERVISOR

REFERENCE NO: 95104005

BROKER: RIEDEL/SMITH ENVIRONMENTAL SERVICES